



REPRESENTATION PETITION

Is this an amended petition? ☐ Yes ☐ No If yes, provide the case number: _____

PARTIES Include information for all parties involved.

EMPLOYER City of Grand Coulee
Contact Lorna Pearce
Title City Clerk
Address 306 Midway Ave, PO Box 180
City, State, ZIP Grand Coulee, WA 99133
Phone 509-633-1150 **Ext.** _____
Email clerkgc@gccitywa.org

PETITIONER

Grand Coulee Police Officers Association/Washington Fraternal Order of Police

Contact James David
Title Attorney
Address Box 126
City, State, ZIP Vancouver WA 98666
Phone 360-859-4000 **Ext.** _____
Email Jim.David@wafop.com

CURRENT BARGAINING REPRESENTATIVE

(If One Exists) Teamsters Local 760
Contact Augustine Jaime Gallegos
Title Business Agent
Address 514 W. Third
City, State, Zip Moses Lake, WA 98837
Phone (509) 765-7460 **Ext.** _____
Email augustine@teamsters760.org

TYPE OF REQUEST Select ONE of the following.

- ☐ **NEW ORGANIZING** to be certified as the representative of employees currently unrepresented.
- ☐ **ADD UNREPRESENTED EMPLOYEES** to an existing bargaining unit as described in WAC 391-25-440.
- ☒ **CHANGE REPRESENTATIVE** of existing bargaining unit.
- ☐ **REMOVE REPRESENTATIVE** of existing bargaining unit.

BARGAINING UNIT

For a new organizing petition, fill out section 2. For a petition to add unrepresented employees, fill out **both** sections 1 and 2. For a petition to change or remove the representative, fill out section 1.

SECTION 1—Describe the Existing Bargaining Unit:

Wall to wall unit of city employees.

Number of Employees in Existing Unit _____

SECTION 2—Describe the Proposed Bargaining Unit:

All sworn police officers, except the chief of police and any confidential employees.

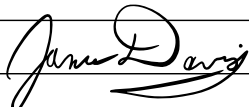
Number of Employees in Proposed Unit 7

If a CBA exists, what is the expiration date? _____

SHOWING OF INTEREST

A showing of interest indicating the support of at least 30 percent of the employees in the bargaining unit must be filed with the petition. **See instructions for more information.**

PETITIONER REPRESENTATIVE

Name James David
Address Box 126
Phone 360-859-4000 **Ext.** _____
Signature 

Title Attorney
City, State, ZIP Vancouver WA 98666
Email Jim.David@wafop.com
Date January 17, 2023

**BEFORE THE PUBLIC EMPLOYMENT RELATIONS COMMISSION
STATE OF WASHINGTON**

Grand Coulee Police Officers
Association/Washington Fraternal
Order of Police

Petitioner/Complainant/Filing Party

v.

City of Grand Coulee

Respondent/Responding Party

Case Number

CERTIFICATE OF SERVICE

I certify that I served a copy of this *(title of document)* Petition to Change Representation
on all parties or their counsel of record on *(date)* January 17, 2023


To:	Name	Lorna Pearce		
	Organization	City of Grand Coulee	<input checked="" type="checkbox"/> E-mail	<input type="checkbox"/> First Class U.S. Mail
	Address	306 Midway Ave, PO Box 180	<input type="checkbox"/> Fax	<input type="checkbox"/> Certified U.S. Mail
	City, State, ZIP	Grand Coulee WA 99133	<input type="checkbox"/> Hand Delivery	<input type="checkbox"/> Registered U.S. Mail
	Email	clerkgc@gccitywa.org		
	Fax			
To:	Name	Augustine Jaime Gallegos		
	Organization	Teamsters Local 760	<input checked="" type="checkbox"/> E-mail	<input type="checkbox"/> First Class U.S. Mail
	Address	514 W. Third	<input type="checkbox"/> Fax	<input type="checkbox"/> Certified U.S. Mail
	City, State, ZIP	Moses Lake, WA 98837	<input type="checkbox"/> Hand Delivery	<input type="checkbox"/> Registered U.S. Mail
	Email	augustine@teamsters760.org		
	Fax			
To:	Name			
	Organization		<input type="checkbox"/> E-mail	<input type="checkbox"/> First Class U.S. Mail
	Address		<input type="checkbox"/> Fax	<input type="checkbox"/> Certified U.S. Mail
	City, State, ZIP		<input type="checkbox"/> Hand Delivery	<input type="checkbox"/> Registered U.S. Mail
	Email			
	Fax			

I certify under penalty of perjury under the laws of the State of Washington that the foregoing is true and correct.

Date signed and submitted January 17, 2023

Print Name James David

Signature



From: [Jim David](#)
To: [PERC, Filing \(PERC\)](#); [PERC, Filing \(PERC\)](#)
Subject: New Filing - Petition to Change Representation - Grand Coulee Police
Date: Friday, February 17, 2023 1:28:21 PM
Attachments: Grand Coulee Police PERC Petition.pdf
PERC Certificate of Service copy.pdf
Change of representation - Interest Cards.pdf

External Email

Please see the attached Petition to Change Representation for the police officers at the City of Grand Coulee. The officers wish to be represented by the Grand Coulee Police Officers Association/Washington Fraternal Order of Police.

Attached is also a certificate of service. A copy of Interest Cards is being transmitted to PERC as well.

Jim David
Attorney

General Counsel
Washington Fraternal Order of Police Labor Coalition
WSBA 13754 | OSB 172814

David Law Offices, PLLC
Box 126
Vancouver WA 98666

Office: 360-859-4000
Cell: 360-241-6528
[Email: jim.david@wafop.com](mailto:jim.david@wafop.com)

